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|---------------------|----------|--------|----------|
| POSITION | INITIALS | ID NO. | DATE |
| FEE DETERMINATION | | | |
| O.I.P.E. CLASSIFIER | 250 | | 10/28/00 |
| FORMALITY REVIEW | SS | 3C877 | 11-27-00 |

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3C947

03/28/01

INDEX OF CLAIMS

| | | | | | |
|---|-------|----------------------------|---|-------|--------------|
| ✓ | | Rejected | N | | Non-elected |
| ✓ | | Allowed | I | | Interference |
| ✓ | | (Through numeral) Canceled | A | | Appeal |
| ✓ | | Restricted | O | | Objected |

| Claim | Final | Original | Date |
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| 1 | 10 | 4 | 1 |
| 2 | 09 | 11 | 5 |
| 3 | 03 | 04 | 05 |
| 4 | 1 | 1 | 1 |
| 5 | 2 | 2 | 0 |
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| 17 | 14 | 14 | 0 |
| 18 | 15 | 15 | 1 |
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| 29 | 26 | 26 | 1 |
| 30 | 27 | 27 | 0 |
| 31 | 28 | 28 | 0 |
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| Claim | Final | Original | Date |
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| Claim | Final | Original | Date |
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If more than 150 claims or 10 actions
staple additional sheet here

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